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**Silent Heart Attacks**

Not every heart attack has classic symptoms. Some have no symptoms at all.

When we think of heart attacks, a typical image comes to mind; a person clutching their chest doubled over in pain. But it’s entirely possible to have a heart attack without chest pain. In fact, it’s possible to have no symptoms at all.

The lack of symptoms doesn’t mean these events are insignificant, though. They can cause long-lasting damage that goes untreated and increases the risk for a second and potentially fatal cardiovascular event.

**How can it be silent?**

Often people learn they experienced a silent heart attack only when imaging shows evidence of previous heart damage. While some people recall no symptoms, others look back and recognize that they felt something- just not a classic heart attack symptom. They may have felt indigestion, a pulled chest muscle, flu symptoms, sweating, lightheadedness, nausea, or shortness of breath. Or they may have had very mild classic symptoms- chest pain and pressure, or pain in the arm, neck, or jaw that didn’t feel severe enough to cause alarm.

**Gender differences in silent heart attacks**

Women more commonly experience these kinds of nontraditional symptoms, possibly because they are more likely to have blockages in the smaller arteries that supply blood to the heart, in addition to the main arteries. But while the symptoms of a silent heart attack may be different, the underlying process is the same. Blood flow to the heart is blocked, potentially damaging the heart muscle.

**Risk factors**

The risk factors for a silent heart attack are not different from a traditional one:

* **Advanced age.** Men ages 45 or older and women ages 55 or older are more likely to have a heart attack.
* **Excess weight.** Even being somewhat overweight is a risk factor, and the risk rises along with body mass index.
* **High blood pressure.** The excess strain from high blood pressure causes the coronary arteries to stiffen and narrow.
* **High cholesterol.** Strive to keep your total cholesterol under 200 milligrams per deciliter (mg/ dl) and your LDL or “bad cholesterol” under 100mg/dl; if you have coronary artery disease, aim for less than 70mg/dl.
* **Lack of exercise.** You need 150 minutes per week of moderate-intensity moderate aerobic activity or 75 minutes per week of vigorous aerobic activity or a combination of both.
* **Tobacco use.**
* **Family history of heart disease** is a significant risk factor, increasing the likelihood of symptoms being vague or silent.
* **People with diabetes** may have a higher likelihood of silent events, particularly if they also have neuropathy.

**Future risk**

A person who has experienced a silent heart attack has an elevated risk of having another attack; they didn’t know they had an event and had no medical intervention to limit the heart’s damage. Further, there are no clues to guide ongoing monitoring. If you are concerned that you may have had a silent heart attack, talk to your doctor about your symptoms to see if you should undergo testing.

Whether the testing reveals a prior heart attack or not, you can immediately begin to lower your risk of a first or subsequent event. You can do this by following a heart-healthy diet, reducing stress, exercising, losing weight, and managing other conditions like diabetes and high blood pressure.

If you are worried that you may have had a silent heart attack, talk to your doctor. A medical professional can review your symptoms and health history, and a physical exam can help determine if you need more tests.

Reference: Bottomline Health

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